

330 Main Street – Third Floor - Hartford, CT 06106 Phone: 860.548.1747 Fax: 860.541.6484 www.conncase.org

## Testimony of David Scata, ConnCASE Legislative Representative Select Committee on Children 3/06/2012 H.B. No. 5347 AN ACT CONCERNING THE REPORTING OF CHILDREN PLACED IN SECLUSION

Senator Gerratana, Representative Urban, and Distinguished Members of the Select Committee on Children; my name is David Scata, Legislative Representative of ConnCASE. ConnCASE represents over two hundred public school administrators of special education in the state of Connecticut.

I am here today in support of House Bill 5347, An Act Concerning Reporting of Children Placed in Seclusion.

We concur that legislation already exists regarding the procedures and protocols that must be followed regarding the use of seclusion and restraint within the public school. The revised language will provide an enhanced reporting process and should provide a more accurate data collection for analysis by the state department of education.

I would like to add that it does occasionally happen that a child's IEP will specify seclusion to be used as a behavioral intervention. This type of Behavior Intervention Plan or BIP should be used only occasionally and only after other forms of behavioral interventions, specifically positive behavioral supports, have been tried and determined not to be effective. The child should be given every opportunity to utilize less restrictive measures for regaining behavioral control.

Children who are still learning to control their impulses and use communication skills to manipulate their environment can sometimes choose aggression toward others or destruction to property as a way of sending a message to the adult that they need a break. In these rare situations, programmed seclusion, removing all forms of intrusive sensory stimuli, can effectively allow the child to regroup before a more problematic behavior, such as aggression, has a chance to emerge. In the vast majority of cases, this removal need not be to a locked seclusion room, but may be done in an unlocked "time out" area. Care should be exercised to maintain the dignity and privacy of the child who has lost behavioral control in these situations, and to allow the child to regain control in an area away from the viewing of other children and adults to the extent possible. We urge all schools to consult with highly qualified behavioral specialists to help determine whether this type of intervention is appropriate for the individual child in question, and involve parents in the process of developing positive behavioral supports.

I thank you for the time and opportunity to hear my testimony today and would be happy to answer any questions you may have.